TENNESSEE GENERAL ASSEMBLY FISCAL REVIEW COMMITTEE



FISCAL MEMORANDUM

HB 2251 – SB 2148

March 3, 2018

SUMMARY OF ORIGINAL BILL: Declares that it is the policy of the state to avoid the direct or indirect use of state funds to promote or support elective abortions. Directs the Commissioner of the Department of Finance and Administration (F&A) to submit to the federal Centers for Medicare and Medicaid Services (CMS) a waiver amendment to the existing TennCare II waiver to require the exclusion of a provider from the program if the Division of TennCare (Division) finds that inclusion of the provider in the program would result in the direct or indirect use of state funds to promote or support elective abortion. Requires the Commissioner, if the waiver amendment is approved, to implement the waiver amendment within ten business days.

FISCAL IMPACT OF ORIGINAL BILL:

NOT SIGNIFICANT

SUMMARY OF AMENDMENT (013743): Deletes and rewrites all language after the enacting clause such that the only substantive changes are: (1) requires a waiver amendment to the existing TennCare II waiver, that requires elective abortion providers be excluded from participation as providers in the TennCare program, to be submitted to the federal Centers for Medicare and Medicaid Services (CMS) for approval; (2) defines "elective abortion provider" as any entity that performed, or operated or maintained a facility that performed, more than 50 abortions in the previous year, or any affiliate of such entity; and (3) does not affect compliance with state budget and appropriations abortion funding.

FISCAL IMPACT OF BILL WITH PROPOSED AMENDMENT:

Unchanged from the original fiscal note.

Assumptions for the bill as amended:

- The Commissioner of F&A can submit a waiver amendment utilizing current resources without an increased appropriation or reduced reversion.
- Based on information provided by the Division, the Division cannot currently determine which providers provide elective abortions for their non-TennCare patients.

- It is assumed the Division would rely on self-reported information from providers to determine whether the provider would be excluded due to the provisions of the proposed legislation; therefore, any fiscal impact is estimated to be not significant.
- It is assumed that if the waiver amendment is not approved by CMS, no action will be taken.
- If the waiver amendment is approved by CMS, the state will implement the waiver. It is assumed that no federal funds would be jeopardized since the Division received approval from CMS.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.

Krista M. Lee, Executive Director

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